

Form 12 (Rev. 12/1/79)

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.J.P.E. CLASSIFIER		6	12-1-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS **BEST AVAILABLE COPY**

✓ Rejected N Non-elected
I Allowed I Interference
- (Through numeral) Canceled A Appeal
+ Restricted O Objected

Claim	Date	Claim	Date	Claim	Date
1	12/1/00	51		101	
2	12/1/00	52		102	
3	12/1/00	53		103	
4	12/1/00	54		104	
5	12/1/00	55		105	
6	12/1/00	56		106	
7	12/1/00	57		107	
8	12/1/00	58		108	
9	12/1/00	59		109	
10	12/1/00	60		110	
11	12/1/00	61		111	
12	12/1/00	62		112	
13	12/1/00	63		113	
14	12/1/00	64		114	
15	12/1/00	65		115	
16	12/1/00	66		116	
17	12/1/00	67		117	
18	12/1/00	68		118	
19	12/1/00	69		119	
20	12/1/00	70		120	
21	12/1/00	71		121	
22	12/1/00	72		122	
23	12/1/00	73		123	
24	12/1/00	74		124	
25	12/1/00	75		125	
26	12/1/00	76		126	
27	12/1/00	77		127	
28	12/1/00	78		128	
29	12/1/00	79		129	
30	12/1/00	80		130	
31	12/1/00	81		131	
32	12/1/00	82		132	
33	12/1/00	83		133	
34	12/1/00	84		134	
35	12/1/00	85		135	
36	12/1/00	86		136	
37	12/1/00	87		137	
38	12/1/00	88		138	
39	12/1/00	89		139	
40	12/1/00	90		140	
41	12/1/00	91		141	
42	12/1/00	92		142	
43	12/1/00	93		143	
44	12/1/00	94		144	
45	12/1/00	95		145	
46	12/1/00	96		146	
47	12/1/00	97		147	
48	12/1/00	98		148	
49	12/1/00	99		149	
50	12/1/00	100		150	

If more than 150 claims or 10 actions
staple additional sheet here

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